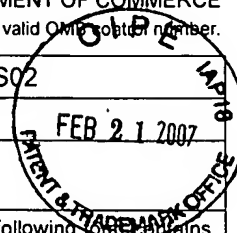


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>Application Data Sheet 37 CFR 1.76</b>		<b>Attorney Docket Number</b>	40853-01-5142-US02
		<b>Application Number</b>	10/579,621
<b>Title of Invention</b>	GLYCOPEGYLATED ERYTHROPOIETIN		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following information contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			



## Secrecy Order 37 CFR 5.2

☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

## Applicant Information:

<b>Applicant 1</b>					
<b>Applicant Authority</b> <input checked="" type="checkbox"/> Inventor		<input type="checkbox"/> Legal Representative under 35 U.S.C. 117		<input type="checkbox"/> Party of Interest under 35 U.S.C. 118	
<b>Prefix</b>	<b>Given Name</b>	<b>Middle Name</b>	<b>Family Name</b>	<b>Suffix</b>	
	Shawn		DeFrees		
<b>Residence Information (Select One)</b> <input checked="" type="checkbox"/> US Residency <input type="checkbox"/> Non US Residency <input type="checkbox"/> Active US Military Service					
<b>City</b>	North Wales	<b>State/Province</b>	PA	<b>Country of Residence</b>	US
<b>Citizenship under 37 CFR 1.41(b)</b>		United States			
<b>Mailing Address of Applicant:</b>					
<b>Address 1</b>	126 Filly Drive				
<b>City</b>	North Wales	<b>State/Province</b>	PA		
<b>Postal Code</b>	19454	<b>Country</b>	US		
<b>Applicant 2</b>					
<b>Applicant Authority</b> <input checked="" type="checkbox"/> Inventor		<input type="checkbox"/> Legal Representative under 35 U.S.C. 117		<input type="checkbox"/> Party of Interest under 35 U.S.C. 118	
<b>Prefix</b>	<b>Given Name</b>	<b>Middle Name</b>	<b>Family Name</b>	<b>Suffix</b>	
	Robert	J.	Bayer		
<b>Residence Information (Select One)</b> <input checked="" type="checkbox"/> US Residency <input type="checkbox"/> Non US Residency <input type="checkbox"/> Active US Military Service					
<b>City</b>	San Diego	<b>State/Province</b>	CA	<b>Country of Residence</b>	US
<b>Citizenship under 37 CFR 1.41(b)</b>		United States			
<b>Mailing Address of Applicant:</b>					
<b>Address 1</b>	6105 Dirac Street				
<b>City</b>	San Diego	<b>State/Province</b>	CA		
<b>Postal Code</b>	92122	<b>Country</b>	US		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>Applicant 3</b>					
Applicant Authority <input checked="" type="checkbox"/> Inventor		<input type="checkbox"/> Legal Representative under 35 U.S.C. 117		<input type="checkbox"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix	
	David	A.	Zopf		
Residence Information (Select One) <input checked="" type="checkbox"/> US Residency <input type="checkbox"/> Non US Residency <input type="checkbox"/> Active US Military Service					
City	Wayne	State/Province	PA	Country of Residence	US
Citizenship under 37 CFR 1.41(b)		United States			
Mailing Address of Applicant:					
Address 1		560 Beechtree Lane			
City	Wayne	State/Province	PA		
Postal Code	19087	Country	US		
All Inventors Must Be Listed - Additional Inventor Information blocks may be produced within this form by adding a row beneath this row.					

**Correspondence Information:**

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).	
<input checked="" type="checkbox"/> An Address is being provided for the correspondence information of this application.	
Customer Number	43850
Email Address	agoel@morganlewis.com

**Application Information:**

Title of the Invention	GLYCOPEGYLATED ERYTHROPOIETIN		
Attorney Docket Number	40853-01-5142-US02	Small Entity Status Claimed <input checked="" type="checkbox"/>	
Application Type	Regular		
Subject Matter			
Suggested Class (if any)		Sub Class (if any)	
Suggested Technology Center (if any)			
Total Number of Drawing Sheets (if any)	12	Suggested Figure for Publication (if any)	1

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>Application Data Sheet 37 CFR 1.76</b>		Attorney Docket Number	40853-01-5142-US02
		Application Number	10/579,621
Title of Invention	GLYCOPEGYLATED ERYTHROPOIETIN		
<b>Publication Information:</b>			
<input type="checkbox"/> Request Early Publication (Fee required at time of Request 37 CFR 1.219)			
<input type="checkbox"/> Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.			

**Representative Information:**

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32).

Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.

Please Select One:	<input checked="" type="checkbox"/> Customer Number	<input type="checkbox"/> US Patent Practitioner	<input type="checkbox"/> US Representative (37 CFR 11.9)
Customer Number	43850		

**Domestic Priority Information:**

This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.

<b>Prior Application Status</b>			
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
This application	U.S. National Phase	PCT/US2004/039712	2004-11-24
PCT/US2004/039712	An application claiming the benefit under 35 USC 119(e)	60/524,989	2003-11-24
PCT/US2004/039712	An application claiming the benefit under 35 USC 119(e)	60/555,504	2004-03-22
PCT/US2004/039712	An application claiming the benefit under 35 USC 119(e)	60/590,573	2004-07-23
PCT/US2004/039712	An application claiming the benefit under 35 USC 119(e)	60/592,744	2004-07-29
PCT/US2004/039712	An application claiming the benefit under 35 USC 119(e)	60/614,518	2004-09-29
PCT/US2004/039712	An application claiming the benefit under 35 USC 119(e)	60/623,387	2004-10-29
PCT/US2004/039712	An application claiming the benefit under 35 USC 119(e)	60/539,387	2004-01-26
Additional Domestic Priority Data may be produced within this form by adding a row beneath this row.			

**Foreign Priority Information:**

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).

Application Number	Country	Filing Date (YYYY-MM-DD)	Priority Claimed
PCT/US2004/039712	WO	2004-11-24	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Additional Foreign Priority Data may be produced within this form by adding a row beneath this row.			

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>Application Data Sheet 37 CFR 1.76</b>		<b>Attorney Docket Number</b>	40853-01-5142-US02
		<b>Application Number</b>	10/579,621
<b>Title of Invention</b>	GLYCOPEGYLATED ERYTHROPOIETIN		

**Assignee Information:**

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

**Assignee 1**

If the Assignee is an Organization check here. ☒

Prefix	Given Name	Middle Name	Family Name	Suffix

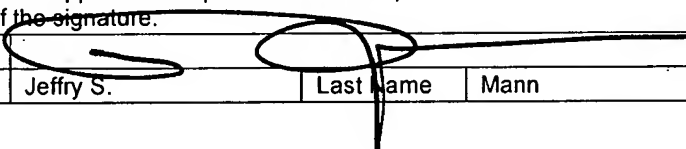
**Mailing Address Information:**

<b>Address 1</b>	Neose Technologies, Inc.		
<b>Address 2</b>	102 Witmer Road		
<b>City</b>	Horsham	<b>State/Province</b>	PA
<b>County</b>	US	<b>Postal Code</b>	19044
<b>Phone Number</b>	(215) 315-9000	<b>Fax Number</b>	(215) 315-9100
<b>Email Address</b>	tesker@morganlewis.com		

Additional Assignee Data be produced within this form by adding a row beneath this row.

**Signature:**

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.

<b>Signature</b>			<b>Date (YYYY-MM-DD)</b>	2007-02-16	
<b>First Name</b>	Jeffrey S.	<b>Last Name</b>	Mann	<b>Registration Number</b>	42,837